See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning JUL 1, 2008 **and ending** JUN 30, 2009

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Termination ☐ Amended return ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
CATHOLIC COMMUNITY SERVICES OF NORTHERN NEVADA

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
P.O. BOX 5099

City or town, state or country, and ZIP + 4
RENO, NV 89513-5099

D Employer identification number
88-0339754

E Telephone number
(775)322-7073

G Gross receipts $ 3,084,345.

F Name and address of principal officer: PETER VOGEL
SAME AS C ABOVE

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.CCSNN.ORG

K Type of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1995 **M** State of legal domicile NV

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: SEE PAGE 2, PART III, LINE 1	
	2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	17
	4	Number of independent voting members of the governing body (Part VI, line 1b)	17
	5	Total number of employees (Part V, line 2a)	105
	6	Total number of volunteers (estimate if necessary)	86
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	0.
	b	Net unrelated business taxable income from Form 990-T, line 34	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	1,291,727.	1,475,467.
	9	Program service revenue (Part VIII, line 2g)	1,572,752.	1,330,286.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	202,482.	120,690.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	31,709.	95,524.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,098,670.	3,021,967.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,709,546.	1,809,540.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 66,775.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,555,144.	1,503,695.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,264,690.	3,313,235.
	19	Revenue less expenses. Subtract line 18 from line 12	-166,020.	-291,268.

			Beginning of Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	8,528,852.	8,604,868.
	21	Total liabilities (Part X, line 26)	226,543.	716,249.
	22	Net assets or fund balances Subtract line 21 from line 20	8,302,309.	7,888,619.

RECEIVED
JAN 14 2010
OGDEN, UT

SCANNED JAN 19 2010

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

▶ Brigid Sullivan Pierce — ✓ 1-8-10
Signature of officer — Date

▶ BRIGID SULLIVAN-PIERCE, VICE PRESIDENT
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ David D Kay CPA — Date 12-29-09 — Check if self-employed ▶ ☐ — Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶
PANGBORN & CO., LTD., CPA'S
924 S. VIRGINIA STREET
RENO, NV 89502-2416

EIN ▶

Phone no ▶

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

GIS

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:
TO CARRY ON CHARITABLE WORK IN THE FIELDS OF RELIGION, EDUCATION AND SOCIAL WELFARE WITHIN NORTHERN NEVADA.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes", describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code) (Expenses $ 855,304. including grants of $) (Revenue $)
HOLY CHILD DAY HOME - HOLY CHILD DAY HOME OPENED IN 1943. THE ENROLLMENT IS APPROXIMATELY 232 CHILDREN. THE DAY HOME OFFERS A FULL-DAY PROGRAM WITH A CURRICULUM FOR EVERY AGE GROUP, AGED TWO THROUGH LATCH-KEY.

4b (Code.) (Expenses $ 626,567. including grants of $) (Revenue $)
THRIFT STORE - THE THRIFT SHOP ALLOWS THOSE WHO CANNOT AFFORD TO SHOP AT MORE EXPENSIVE STORES. IT ALSO OFFERS FREE CLOTHING VOUCHERS FOR THE NEEDY INCLUDING THE VICTIMS OF NATURAL DISASTERS. SERVED 64,469

4c (Code.) (Expenses $ 559,949. including grants of $) (Revenue $)
DINING ROOM - THE DINING ROOM OPENED IN 1961. APPROXIMATELY 623 PERSONS ARE SERVED HOT MEALS EACH DAY AND ALSO PROVIDES OTHER ASSISTANCE TO HOMELESS PEOPLE.

4d Other program services. (Describe in Schedule O.)
(Expenses $ 792,913. including grants of $) (Revenue $)

4e **Total program service expenses** ▶ $ 2,834,733. *(Must equal Part IX, Line 25, column (B))*

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		X
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? *If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the U S.? *If "Yes," complete Schedule F, Part I*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Part II*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Part III*	16		X
17	Did the organization report more than $15,000 on Part IX, column (A), line 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		X
21	Did the organization report more than $5,000 on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X
22	Did the organization report more than $5,000 on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b-24d and complete Schedule K. If "No", go to question 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? *If "Yes," complete Schedule L, Part IV*	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? *If "Yes," complete Schedule L, Part IV*	28b		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35		X
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	26		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	105		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return. (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		5c		
6a	Did the organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than $75?		7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		7h	X	
8	**Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9	**Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter: N/A				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter: N/A				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b			

Part VI Governance, Management, and Disclosure *(Sections A, B, and C request information about policies not required by the Internal Revenue Code)*

Section A. Governing Body and Management

			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body	1a 17		
b	Enter the number of voting members that are independent	1b 17		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	11		X

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
a	The organization's CEO, Executive Director, or top management official?	15a		X
b	Other officers or key employees of the organization?	15b		X
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶

DAVE CARROTHERS - (775) 322-7073
500 E. 4TH ST., RENO, NV 89513

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees, and former such persons.

☐ Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
THE MOST REVEREND RANDOL CHAIRMAN	3.70	X		X				0.	0.	0.
BILL STAAB IMMEDIATE PAST PRESIDENT	4.80	X						0.	0.	0.
DAN MAGEE PRESIDENT	6.70	X		X				0.	0.	0.
VICKI MONTAGUE SECRETARY	4.80	X		X				0.	0.	0.
BOB CAPURRO TREASURER	6.00	X		X				0.	0.	0.
BRIGID SULLIVAN-PIERCE VICE PRESIDENT	4.80	X		X				0.	0.	0.
ROBERT E. ARMSTRONG TRUSTEE	3.70	X						0.	0.	0.
JAMES CAVILIA TRUSTEE	3.70	X						0.	0.	0.
ARMANDO GAYTAN TRUSTEE	3.70	X						0.	0.	0.
MICHAEL HERRERA, DDS TRUSTEE	3.70	X						0.	0.	0.
DONALD LUCKADOO TRUSTEE	3.70	X						0.	0.	0.
ROSS BARKER TRUSTEE	3.70	X						0.	0.	0.
TIM WANNER TRUSTEE	3.70	X						0.	0.	0.
FR. GEORGE WOLF TRUSTEE	3.70	X						0.	0.	0.
NICK ROSSI TRUSTEE	6.00	X						0.	0.	0.
TOM DOLAN TRUSTEE	3.70	X						0.	0.	0.
PAT PETTINARI TRUSTEE	4.10	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL FORD EXECUTIVE DIRECTOR	40.00			X				87,593.	0.	0.
1b Total ▶								87,593.	0.	0.

2 Total number of individuals (including those in 1a) who received more than $100,000 in reportable compensation from the organization ▶ 0

		Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. NONE

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including those in 1) who received more than $100,000 in compensation from the organization ▶ 0

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	319,426.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1156041.				
	g Noncash contributions included in lines 1a-1f $						
	h **Total.** Add lines 1a-1f			1,475,467.			
Program Service Revenue		Business Code					
	2 a HOLY CHILD DAY HOME	624410		536,216.	536,216.		
	b THRIFT STORE SALES	453310		493,812.	493,812.		
	c RENTAL INCOME - SHELTE	721110		121,833.	121,833.		
	d ADOPTION FEES	900099		89,417.	89,417.		
	e SCHOOL LUNCH FEES	900099		50,164.	50,164.		
	f All other program service revenue	900099		38,844.	38,844.		
	g **Total.** Add lines 2a-2f			1,330,286.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			137,075.			137,075.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
		(i) Real	(ii) Personal				
	6 a Gross Rents	30,085.					
	b Less: rental expenses						
	c Rental income or (loss)	30,085.					
	d Net rental income or (loss)			30,085.	30,085.		
		(i) Securities	(ii) Other				
	7 a Gross amount from sales of assets other than inventory	23,099.					
	b Less: cost or other basis and sales expenses	39,484.					
	c Gain or (loss)	-16,385.					
	d Net gain or (loss)			-16,385.	-16,385.		
	8 a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	a	88,333.				
	b Less: direct expenses	b	22,894.				
	c Net income or (loss) from fundraising events			65,439.	65,439.		
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
	Miscellaneous Revenue	Business Code					
	11 a						
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a-11d						
	12 **Total Revenue.** Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			3,021,967.	1,409,425.	0.	137,075.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2 Grants and other assistance to individuals in the U S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	91,799.		91,799.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,362,337.	1,186,659.	168,993.	6,685.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	37,776.	26,248.	11,528.	
9 Other employee benefits	192,419.	182,492.	9,303.	624.
10 Payroll taxes	125,209.	102,741.	21,961.	507.
11 Fees for services (non-employees):				
a Management				
b Legal	32,346.	31,158.	1,188.	
c Accounting	24,385.		24,385.	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	304,774.	299,445.	5,329.	
17 Travel	34,532.	34,494.	38.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	7,454.	4,759.	2,695.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	234,646.	224,508.	10,138.	
23 Insurance				
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a SUPPLIES	293,354.	286,566.	6,788.	
b CLIENT ASSISTANCE	209,489.	209,489.		
c REPAIRS AND MAINTENANCE	112,350.	110,128.	2,222.	
d PROFESSIONAL FEES	96,012.	49,153.	46,859.	
e PRINTING AND PUBLISHING	86,786.	23,105.	4,722.	58,959.
f All other expenses	67,567.	63,788.	3,779.	
25 **Total functional expenses.** Add lines 1 through 24f	3,313,235.	2,834,733.	411,727.	66,775.
26 **Joint Costs.** Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	33,804.	1	62,855.
	2	Savings and temporary cash investments	3,495,443.	2	3,291,337.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	76,292.	4	80,063.
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net	350,000.	7	249,000.
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	11,177.	9	10,992.
	10a	Land, buildings, and equipment: cost basis 10a 6,377,996.			
	b	Less accumulated depreciation. Complete Part VI of Schedule D 10b 1,644,573.	4,226,849.	10c	4,733,423.
	11	Investments - publicly traded securities	325,287.	11	167,198.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	10,000.	15	10,000.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	8,528,852.	16	8,604,868.
Liabilities	17	Accounts payable and accrued expenses	140,156.	17	169,905.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	75,757.	23	539,249.
	24	Unsecured notes and loans payable		24	
	25	Other liabilities. Complete Part X of Schedule D	10,630.	25	7,095.
	26	**Total liabilities.** Add lines 17 through 25	226,543.	26	716,249.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	8,210,928.	27	7,853,714.
	28	Temporarily restricted net assets	89,931.	28	33,455.
	29	Permanently restricted net assets	1,450.	29	1,450.
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	8,302,309.	33	7,888,619.
	34	Total liabilities and net assets/fund balances	8,528,852.	34	8,604,868.

Part XI Financial Statements and Reporting

			Yes	No
1		Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other		
2a		Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
b		Were the organization's financial statements audited by an independent accountant?	2b	X
c		If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	
3a		As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b		If "Yes," did the organization undergo the required audit or audits?	3b	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization	Employer identification number
CATHOLIC COMMUNITY SERVICES OF NORTHERN NEVADA	88-0339754

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only **one** organization)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).** (Attach Schedule H.)

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete the Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).** (see instructions)

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii)	A family member of a person described in (i) above?	11g(ii)	
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

h Provide the following information about the organizations the organization supports.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2798236.	2304257.	2383003.	2303118.	2400272.	12188886.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 - 3	2798236.	2304257.	2383003.	2303118.	2400272.	12188886.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public Support.** Subtract line 5 from line 4						12188886.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	2798236.	2304257.	2383003.	2303118.	2400272.	12188886.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	134,995.	214,267.	239,183.	228,608.	167,160.	984,213.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						13173099.

12 Gross receipts from related activities, etc. (see instructions)	12	2,508,872.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	92.53 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	93.03 %

16a **33 1/3% support test - 2008.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2007.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2008.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or $5,000						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support** (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2008** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2007** Schedule A, Part IV-A, line 27h	18	%

19a **33 1/3% support tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Schedule D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization CATHOLIC COMMUNITY SERVICES OF NORTHERN NEVADA

Employer identification number 88-0339754

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g , recreation or pleasure)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of certified historic structure

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

		Held at the End of the Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

		Amount
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	1,450.				
b	Contributions					
c	Investment earnings or losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance	1,450.				

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ▶ .32 %
b Permanent endowment ▶ .02 %
c Term endowment ▶ _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i)	unrelated organizations	3a(i)	X
(ii)	related organizations	3a(ii)	X
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a	Land	239,633.	1,087,125.		1,326,758.
b	Buildings		5,051,238.	1,644,573.	3,406,665.
c	Leasehold improvements				
d	Equipment				
e	Other				
Total.	Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)*			▶	4,733,423.

Schedule D (Form 990) 2008

832052
12-23-08

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total. (Col (b) should equal Form 990, Part X, col (B) line 12) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
Total. (Col (b) should equal Form 990, Part X, col (B) line 13) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 15)* ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	
DEPOSITS - RENTAL	7,095.
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	7,095.

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,021,967.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,313,235.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-291,268.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-122,422.
9	Total adjustments (net). Add lines 4-8	9	-122,422.
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-413,690.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	2,899,541.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-21,422.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	-101,004.		
e	Add lines **2a** through **2d**			2e	-122,426.
3	Subtract line **2e** from line **1**			3	3,021,967.
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total revenue. Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	3,021,967.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	3,313,235.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	3,313,235.
4	Amounts included on Form 990, Part IX, line 25, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total expenses. Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18.)			5	3,313,235.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4, Part X, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART V, LINE 4: INVESTMENT RETURNS OF INTEREST AND DIVIDENDS ARE USED TO SUPPORT THE CHARITABLE OPERATIONS OF THE ORGANIZATION.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

UNREALIZED APPRECIATION ON SECURITIES

NOTE RECEIVABLE VALUATION

PART XII, LINE 2D - OTHER ADJUSTMENTS:

Part XIV Supplemental Information *(continued)*

VALUATION ALLOWANCE

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: CATHOLIC COMMUNITY SERVICES OF NORTHERN NEVADA

Employer identification number: 88-0339754

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

EMERGENCY ASSISTANCE & IMMIGRATION- PROVIDES EMERGENCY AID AND ASSISTANCES TO FAMILIES AND INDIVIDUALS, CAUSED BY UNEMPLOYMENT, ILLNESS, FAMILY CRISIS & OTHER PERSONAL SITUATIONS. IMMIGRATION OFFERS CITIZENSHIP AND TRANSLATION SERVICES TO FAMILIES AND INDIVIDUALS. APPROXIMATELY 6,992 INDIVIDUALS SERVED FOR EMERGENCY ASSISTANCE AND 974 FOR IMMIGRATION SERVICES.

EXPENSES $ 292336. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

FAMILY SHELTERS & RESIDENCE: EXPENSE 146,126

FOOD COMMODITIES 184,120

ADOPTION 88,385

CAC MEALS 81,946

TOTAL OTHER PROGRAMS 500,577

EXPENSES $ 500577. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

FORM 990, PART VI, SECTION A, LINE 10: THE ORGANIZATION'S FORM 990 IS PREPARED BY A CERTIFIED PUBLIC ACCOUNTANT. AFTER THE FORM 990 IS COMPLETED, MEMBERS OF THE ORGANIZATION'S GOVERNING BODY ARE PROVIDED A COPY BY EMAIL OR PHOTOCOPY. THEN THE ORGANIZATION FORMALLY APPROVES THE FORM 990 AT A BOARD MEETING.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION HAS A WRITTEN CONFLICT OF INTEREST POLICY. TRUSTEES AND OFFICERS ARE REQUIRED TO SIGN AN ACKNOWLEDGEMENT THAT THEY HAVE READ AND UNDERSTAND THE POLICY. TRUSTEES AND OFFICERS ARE RESPONSIBLE FOR ENFORCING ITS RULES. TRUSTEES AND OFFICERS ARE

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: CATHOLIC COMMUNITY SERVICES OF NORTHERN NEVADA

Employer identification number: 88-0339754

ENCOURAGED TO DISCUSS OPENLY ANY POTENTIAL CONFLICTS OF INTEREST.

APPROVING TRANSACTIONS INVOLVING CONFLICTS OF INTEREST MUST BE MADE BY THE AFFIRMATIVE VOTE OF A MAJORITY.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL INFORMATION AVAILABLE UPON REQUEST. A PRODUCTION CHARGE MAY APPLY.

Catholic Community Services of Northern Nevada Schedule of Fixed Assets

Asset Description for Year End 6/30/2009	Date	Life	+Add -Remove	6/30/2009 Cost	Dep Exp	6/30/2009 Acc Dep
1801-004 Land						
420 Reno Avenue	7/1/1965			18,019 95	0 00	0 00
440 Reno Avenue	7/1/1960			27,000 00	0 00	0 00
437 & 437-1/2 Taylor	6/30/1985			49,994 00	0 00	0 00
500 E 4th Street	1/8/1999			265,000 00	0 00	0 00
325 Valley Road, Reno	2/16/2006			96,007.04	0 00	0 00
Parking lot south of bldg at 500 E 4th St	3/5/2007			76,999 00	0 00	0 00
Subtotal				533,019 99	0 00	0 00
1803-031						
Land - 435 West Taylor	8/7/1998			36,000 00	0 00	0 00
1803-773						
Land 401 1/2 Gould (now Bldg D, 395 Gould)	8/1/1997			26,970 00	0 00	0 00
401 1/2 Gould undepreciated old 2 Bdrm Hse	8/17/2001			32,771 70	0 00	0 00
Land - 397 Gould St Bldg A Residence	10/1/1996			108,188 14	0 00	0 00
Land - 389 Gould St Bldg B & C (now studios)	10/1/1996			108,188 14	0 00	0 00
389 Gould St undepreciated old Bldgs B & C	6/1/2009	39 5	97,076 85	97,076 85	0 00	0 00
Subtotal				373,194 83	0 00	0 00
1802-001 Land Improvements-CO						
500 E 4th St - Parking Lot Repair	9/29/1998	15		4,315 00	287 67	3,092 52
500 E 4th St - New Concrete Ramp	10/13/1998	15		2,376 00	158 40	1,702 80
500 E 4th St - Parking Lot Repaving	8/28/2002	15		11,400 00	760 00	5,193 33
500 E 4th St - Parking Lot Concrete Curbs	11/3/2005	15		23,675 00	1,578 33	5,787 21
behind 500 E 4th St - South Parking Lot	11/7/2007	15		106,945 40	7,129 69	11,882 82
Subtotal				148,711 40	9,914 09	27,658 68
1802-025 Land Improvements						
325 Valley Road, Reno, Patio & Parking Lot	5/4/2006	15		29,860 50	1,990 70	6,303 88
325 Valley Road, Reno, Patio/Parking Fence	5/24/2006	15		2,338 00	155 87	493 59
Subtotal				32,198 50	2,146 57	6,797 47
1802-031 Land Improvements HCDH						
Concrete Drainage System west side bldg	6/21/2006	15		37,894 00	2,526 27	7,578 81
East Rock Yard Moisa brown surface	6/27/2006	7		30,032 38	4,290 34	12,871 02
Rear Main Yard concrete paths & curbs	8/1/2006	15		15,675 00	1,045 00	3,047 92
Rear Main Yard Moisa surface	8/1/2006	7		26,776 72	3,825 25	11,156 98
Rear Main Yard green synthetic turf	8/1/2006	7		52,134 23	7,447 75	21,722 60
Reno Ave walkway, planters & rock	8/15/2006	15		6,843 57	456 24	1,330 70
Lollipops northwest front yard fence	8/15/2006	15		2,302 56	153 50	447 71
Northwest front yard concrete curb, paths	8/15/2006	15		3,600 00	240 00	700 00
Northwest front yard Moisa & turf surfaces	8/15/2006	7		16,225 00	2,317 86	6,760 43
Southwest rear yard Moisa surface	8/17/2006	7		7,700 00	1,100 00	3,208 33
Reno Ave front yard irrigation system	8/21/2006	15		4,450 00	296 67	865 29
Subtotal				203,633 46	23,698 88	69,689 78
1808-011 Construction Street Sign at 500 e 4th st			16,000 00	16,000 00		
1808-771 Construction Studios	9/18/2007		499,021 31	623,543 55	includes amount in acc	
Subtotal				639,543 55		
1813-031 Buildings						
Building - 435 West Taylor	8/7/1998	27 5		60,000 00	2,181 82	23,818 20
1813-773 Bldg A 397 Gould St Residence	10/1/1996	39 5		141,582 85	3,584 38	44,804 69
389 Gould St Bldg B & C (now studios)	10/1/1996	39 5	-97,076 85	0 00	3,285 68	
Gutters for Bldgs B & C Residence	3/21/1997	25	-750 00	0 00	27 50	
Sewer line replacement 25 feet Residence	12/16/1997	42		4,409 91	105 00	1,207 50
New Roof & Repair 397 Gould St Bldg A	10/12/1999	15		18,735 00	1,249 00	10,832 67
401 1/2 Gould Residence Bldg D - 395 Gould	1/18/2002	39 5		373,796 15	9,463 19	70,973 93
Subtotal				538,523 91	17,714 75	127,818 78
1814001 Building 500 E. 4th St.						
500 E 4th Street	1/8/1999	39		798,000 00	20,461 54	214,846 17
500 E 4th Street Garage & Deck south side	3/7/2008	39 5		115,073 34	2,913 25	3,884 33
Subtotal				913,073 34	23,374 79	218,730 50
1821-004 Buildings						
440 Reno Avenue	7/1/1960	41		223,077 41	0 00	223,077 41
420 Reno Avenue	7/1/1965	31 5		36,084 86	0 00	36,084 86

Catholic Community Services of Northern Nevada Schedule of Fixed Assets

Asset Description for Year End 6/30/2009	Date	Life	+Add -Remove	6/30/2009 Cost	Dep Exp	6/30/2009 Acc Dep
440 Reno Avenue	4/30/1990	31 5		200,211.07	6,355 91	123,918 38
437/437-1/2 Taylor	6/30/1985	41		58,390 29	1,424 15	39,000.78
Mini Barn St Vincent's Residence near D bldg	11/26/1996	15		995.00	66 33	862 29
325 Valley Road, Reno	2/16/2006	39 5		928,068 06	23,495 39	80,275 92
Subtotal				1,446,826 69	31,341 78	503,219 64
1822-001 Building Improvements						
Carpet pad & tack strip - 500 E 4th Street	11/10/1998	7		1,242.66	0 00	1,242 66
Remodel 500 E 4th Street #1	11/3/1998	39		148,979 63	3,819.99	40,746 56
Remodel 500 E 4th Street #2	1/29/1999	39		24,336 39	624 01	6,500 10
Remodel 500 E 4th Street #3 T/S 2 Archways	10/25/1999	39		10,398 76	266 63	2,599 64
St Vincent Residence A/C Bldg C now Bldg A	7/29/2003	7		5,200 00	742 86	4,395 26
St Vincent Pantry 1 swamp cooler	4/14/2005	7		3,998 40	571 20	2,284 80
St Vincent Thrift Store 4 swamp coolers	4/14/2005	7		15,993 60	2,284 80	9,139 20
Remodel 500 E 4th St Adoption upstairs	9/12/2005	39		6,606 00	169 38	649 29
Remodel 500 E 4th St Emerg Asst downstairs	9/13/2005	39		14,152 00	362 87	1,391 00
Remodel 325 Valley Rd, construction changes	2/16/2006	39 5		11,085 00	280 63	958 82
St Vincent Pantry sinks and drains	2/17/2006	15		6,700 00	446 67	1,340 01
St Vincent Center Bldg signage at 500 E 4th St	6/7/2007	5		8,854 00	1,770 80	3,689.17
Loading Dock Awning 325 Valley Road	9/24/2008	15	13,620 00	15,420 00	856 67	856 67
St Vincent's Residence Bldg A Small Kitchen	7/9/2008	15		6,384 33	425 62	425 62
St Vincent's Residence Bldg A Large Kitchen	9/8/2008	15	10,623 04	10,623 04	590 17	590 17
500 E 4th St complete new roof & walkpads	11/5/2008	15	155,744 00	155,744 00	6,921 95	6,921 95
500 E 4th St Electrical Upgrade Thrift Store	4/1/2009	15	6,782 40	6,782 40	113 04	113 04
500 E 4th St Electrical Upgrade Food Pantry	4/1/2009	15	1,402 49	1,402 49	23 38	23 38
500 E 4th St Electrical Upgrade Immigration	4/1/2009	15	2,911 86	2,911 86	48 53	48 53
St Vincent Residence A/C Bldg A for rooms	5/26/2009	7	4,064 34	4,064 34	96 77	96 77
Remodel 500 E 4th St Immigration SW corner	6/24/2009	39	12,933 04	12,933 04	27 64	27 64
St Vincent Food Pantry Lobby VCT Tile Floor	6/29/2009	7	3,551 93	3,551 93	42 29	42 29
Subtotal				477,363 87	20,485 88	84,082 54
1822-031 Building Improvements-HCDH						
Tile Bathroom	3/11/1996	7		2,253 02	0 00	2,253 02
New water line 437 1/2 Taylor St	12/1/1997	30		2,925 93	97 53	1,129 72
Replace cast iron waste - 440 Reno Ave	11/10/1998	30		2,130 91	71 03	757 65
420 Reno Avenue - New Gas Furnace	10/24/2001	15		3,189 00	212 60	1,647 65
435 West Taylor - New Gas Furnace	10/24/2001	15		3,562 00	237 47	1,840 39
437 West Taylor - New Gas Furnace	10/24/2001	15		3,189 00	212 60	1,647 65
Carpet Holy Child classrooms, halls, offices	7/20/2006	7		30,374 14	4,339 16	13,017 48
440 Reno Ave, HCDH, Roof & Gutters	10/18/2006	15		51,892 00	3,459 47	9,513 54
440 Reno Ave, HCDH, Roof Walk Pads	11/28/2006	15		5,175 00	345 00	920 00
440 Reno Ave, 4 foot Lighting fixtures, inside	1/8/2008	7		28,023 40	4,003 34	6,005 01
Subtotal				132,714 40	12,978 20	38,732 12
1831-004 Machinery & Equipment						
Misc Machinery & Eqpt - HCDH	6/30/1988			33,020 93		33,020 93
Computer Packard Bell S605 (Bookkeeper)	4/15/1998	5		899 00		899 00
85 Clark -109 GCX25 used Forklift for Pantry	12/16/1998	5		7,500 00		7,500 00
Hypercom T7P BFE for B of A MC and VISA	3/24/1999	5		706 20		706 20
Computer eMachine 366i (Donor List)	5/24/1999	5		649 99		649 99
Minuteman 200 Floor Scrubber 20" for T/S	7/27/1999	5		3,370 00		3,370 00
Phone System Norstar ICS - Admin	12/29/2004	5		7,094 60	1,418 92	6,503 38
Phone System Norstar ICS - in T/S	12/29/2004	5		3,820 00	764 00	3,501 67
Floor Burnisher M1600 for T/S	9/28/2005	5		1,099 00	219 80	842 57
Floor Burnisher M2000 for D/R	9/28/2005	5		1,099 00	219 80	842 57
CCTV Video Security Surveillance for T/S	3/10/2006	5		8,317 68	1,663 54	5,280 45
CCTV Video Security Surveillance for D/R	3/10/2006	5		4,824.26	964 85	3,062 65
CCTV Video Security Surveillance for F/P	3/10/2006	5		3,493 43	698 69	2,217 80
Kool Star Refrigerator/Freezer for F/P	3/16/2006	7		22,355 92	3,193 70	10,481 38
Copier Toshiba Model Estudio 232 (Pantry)	1/18/2007	5		5,900 00	1,180 00	2,950 00
Subtotal				104,150 01	10,323 30	81,828 59
1831-025 Machinery & Equipment-DR						
Two - Eagle Buffet Hot Food Tables	7/19/2005	7		4,859 00	694 14	2,545 18
325 Valley Rd Dining Room furnished equip	2/16/2006	7		42,669 80	6,095 69	20,826 94
Sold Market Forge 100 gallon soup kettle	3/16/2006			-6,686 40		-79 60

Catholic Community Services of Northern Nevada Schedule of Fixed Assets

Asset Description for Year End 6/30/2009	Date	Life	+Add -Remove	6/30/2009 Cost	Dep Exp	6/30/2009 Acc Dep
Cleveland 60 gallon tilting soup kettle	6/28/2006	7		18,135.40	2,590.77	7,988.21
Subtotal				58,977.80	9,380 60	31,280 73
1831-031 Machinery & Equip-HCDH						
A/C System for 2 rear classrooms added '90	7/25/1990	7		6,507 00		6,507 00
Kitchen Remodel	2/15/1996	7		35,223 03		35,223 03
Floor sink	8/26/1996	7		1,528.00		1,528 00
Copier Toshiba Model 1560 (Jan 2000)	1/29/1997	7		3,495.00		3,495 00
Beverage Air 3 Door Reach-In Refrigerator	6/8/2006	7		3,899 00	557 00	1,715 04
East Rock Yard Play Equipment	6/27/2006	7		59,986 11	8,569 44	25,708.32
Rear Main Yard Play Equipment	8/1/2006	7		54,825 57	7,832 22	22,843 98
Infant cozy corner loft at Holy Child	8/11/2006	7		2,460 37	351 48	1,025 15
Trike Depot in Rear Main Yard at Holy Child	8/15/2006	7		2,659 35	379 91	1,108 07
Northwest front yard toddler structure at HC	8/15/2006	7		11,421.30	1,631 61	4,758 86
Southwest rear yard play house at HC	8/17/2006	7		3,545 00	506 43	1,477 09
HVAC system for Bldg except '90 addition	9/25/2006	15		86,804 00	5,786 93	16,396 30
True Freezer from Resco 49 cu ft Stainless	1/4/2008	7		3,129 00	447 00	670 50
Vodavi STS phone system (from T/S #2)	4/3/2009	5	6,805 50	6,805 50	340 28	340 28
Subtotal				282,288.23	26,402 30	122,796 61
1832-004 Furniture & Fixtures						
Misc Furniture & Fixtures - Admin				9,166 34		9,166 34
Misc Furniture & Fixtures - HCDH	6/30/1988			16,757 06		16,757 06
(4) Pantry Shelves (8' x 4') at 500 E 4th St	8/13/1998	10		600 00	5 00	600 00
(24) Chairs, Desk, Credenza at 500 E 4th St	10/20/1998	5		3,020 00		3,020 00
(4) Oak 4'x8' Conf Tables at 500 E 4th St	10/23/1998	5		2,380 00		2,380 00
Burgandy Chairs 30-12", 72-14" HCDH	1/27/2000	5		1,912 20		1,912 20
Glass & Panel Partition w/ Door 500 E 4th E/S	10/21/2005	5		3,576 52	715 30	2,682 38
25 - 12 foot Folding Tables w/ Benches D/R	9/13/2005	5		28,880 60	5,776 12	20,688 36
Cozy Corner and Play Lofts at HCDH	9/6/2006	5		13,997 77	2,799 55	7,932 06
Glass & Panel Partition w/ Door 500 E 4th F/P	2/13/2008	5		3,073 77	614 75	870 90
(8) Cafeteria Tables for HCDH	10/20/2008	5	3,805 00	3,805 00	570.75	570 75
Subtotal				87,169 26	10,481 47	66,580 04
1833001 Office Equip-CO						
IBM Wheelwriter 10 Typewriter	1/17/1991	7		594 00		594 00
Blackbaud Site License (Bookkeeper)	4/30/1994	5		2,375 00		2,375 00
Misc Office Eqpt - Admin	6/30/1988			28,819 75		28,819 75
C-Tech 486-25 Computer (Payroll backup)	11/2/1993	5		2,099 00		2,099 00
Okidata 591 Dot Matrix Printer (Bookkeeper)	5/25/2000	5		709 83		709 83
Copier Toshiba Model ES 3511 (Exec Dir)	7/14/2005	5		7,799 00	1,559 80	6,239 20
StarChild Donor Database in Access	5/1/2006	5		5,100 00	1,020 00	3,230 00
Subtotal				47,496 58	2,579 80	44,066 78
1833031 Office Equipment-HCDH						
Misc Office Eqpt - HCDH	6/30/1988			3,997 00		3,997 00
EZ-Care2 Software - HCDH	7/1/2002	5		2,218 00		2,218 00
HP Fax Model 700 - HCDH	3/1/1995	5		553 69		553 69
Copier Toshiba Model ES 350	2/4/2005	5		6,995 00	1,399 00	6,178 92
Subtotal				13,763 69	1,399 00	12,947 61
1841004 Vehicles						
Subtotal				0 00	0 00	0 00
1841011 Vehicles-Thrift Store						
1998 Chevrolet 3500 HD Box Truck w/lift	1/6/2000	5		27,179 50		27,179 50
2001 Chevrolet 3500 Box Truck w/lift	2/19/2003	5		19,050 00		19,050 00
2006 Chevrolet Silverado PU Truck w/lift	11/17/2005	5		33,991 00	6,798 20	24,926 73
2006 GMC W3500 Box Truck w/lift	5/30/2007	5		40,327 25	8,065 45	17,475 14
Subtotal				120,547 75	14,863 65	88,631 38
1841025 Vehicles-Dining Room						
2003 Chev Refrig Box Truck Model C4500	8/16/2002	5		29,708 50		29,708 50
2006 GMC Refrig Box Truck Model W5500	4/21/2006	5		61,099 91	12,219 98	39,714 94
Subtotal				90,808 41	12,219 98	69,423 43
1841031 Vehicles-HCDH						
1993 Ford Van - #PHA81597	2/25/1993	5		20,586 00		20,586 00
2000 Ford F250 Super Duty Pick Up Truck	4/20/2009	5	6,660 00	6,660.00	333 00	333 00

Catholic Community Services of Northern Nevada Schedule of Fixed Assets

Asset Description for Year End 6/30/2009	Date	Life	+Add -Remove	6/30/2009 Cost	Dep Exp	6/30/2009 Acc Dep
Subtotal				27,246 00	333 00	20,919 00
1848012 Lease Hold Improv-Clarkson						
Vodavi phone system at T/S #2 Clarkson	11/8/2006	5	-4,513 62	0 00	677 04	0 00
Pole sign & 2 wall signs at T/S #2 Clarkson	12/8/2006	5		8,750 08	1,750 02	4,520 89
ADT security monitoring system at T/S #2	12/13/2006	5		1,994 00	398 80	1,030 23
Subtotal				10,744 08	2,825 86	5,551 12
Total			738,661 29	6,377,995 75	234,645 72	1,644,573 01

Form **8868**
(Rev. April 2009)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**

OMB No. 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I **Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶ [ ]

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits.*

Type or print	Name of Exempt Organization	Employer identification number
File by the due date for filing your return See instructions	CATHOLIC COMMUNITY SERVICES OF NORTHERN NEVADA	88-0339754
	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 5099	
	City, town or post office, state, and ZIP code For a foreign address, see instructions. RENO, NV 89513-5099	

Check type of return to be filed (file a separate application for each return):

[X] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (sec 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ▶ DAVE CARROTHERS 500 E. 4TH ST. - RENO, NV 89513
  Telephone No. ▶ (775) 322-7073 FAX No. ▶
- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ▶ [ ]. If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2010, to file the exempt organization return for the organization named above The extension is for the organization's return for:
▶ [ ] calendar year _____ or
▶ [X] tax year beginning JUL 1, 2008, and ending JUN 30, 2009.

2 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	3a	$
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	$
c	**Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	3c	$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see Instructions.** Form **8868** (Rev 4-2009)

823831
05-26-09